

County: Oconto
RIVERSIDE HEALTH/REHAB CENTER

Facility ID: 7660

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101 1ST STREET

OCONT0 54153 Phone: (920) 834-4575

Operated from 1/1 To 12/31 Days of Operation: 366

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/00): 87

Total Licensed Bed Capacity (12/31/00): 103

Number of Residents on 12/31/00: 71

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Average Daily Census:

Corporation

Skilled

No

Yes

71

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/00)				Length of Stay (12/31/00)	
		Primary Diagnosis	%	Age Groups	%		%
Home Health Care	No					Less Than 1 Year	36.6
Supp. Home Care-Personal Care	No					1 - 4 Years	38.0
Supp. Home Care-Household Services	No	Developmental Disabilities	1.4	Under 65	5.6	More Than 4 Years	25.4
Day Services	No	Mental Illness (Org./Psy)	19.7	65 - 74	9.9		
Respite Care	Yes	Mental Illness (Other)	26.8	75 - 84	36.6		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	38.0	*****	
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	2.8	95 & Over	9.9	Full-Time Equivalent	
Congregate Meals	No	Cancer	7.0			Nursing Staff per 100 Residents	
Home Delivered Meals	No	Fractures	12.7		100.0	(12/31/00)	
Other Meals	Yes	Cardiovascular	7.0	65 & Over	94.4	-----	
Transportation	No	Cerebrovascular	12.7			RNs	10.4
Referral Service	No	Diabetes	5.6	Sex	%	LPNs	7.0
Other Services	No	Respiratory	4.2			Nursing Assistants	
Provide Day Programming for		Other Medical Conditions	0.0	Male	32.4	Aides & Orderlies	
Mentally Ill	No			Female	67.6		
Provide Day Programming for			100.0				
Developmentally Disabled	No				100.0		

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other			Private Pay		Managed Care			Total	Percent Of All Residents	
	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%			Per Diem Rate
Int. Skilled Care	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Skilled Care	12	100.0	\$242.00	38	84.4	\$90.56	0	0.0	\$0.00	12	92.3	\$134.75	1	100.0	\$86.03	63	88.7%
Intermediate	---	---	---	7	15.6	\$76.02	0	0.0	\$0.00	1	7.7	\$134.75	0	0.0	\$0.00	8	11.3%
Limited Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Disabled	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain Inj.	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Dependent	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	12	100.0		45	100.0		0	0.0		13	100.0		1	100.0		71	100.0%

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00				
		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Percent Admissions from:						
Private Home/No Home Health	14.9	Bathing	0.0	77.5	22.5	71
Private Home/With Home Health	7.5	Dressing	8.5	69.0	22.5	71
Other Nursing Homes	3.0	Transferring	32.4	52.1	15.5	71
Acute Care Hospitals	65.7	Toilet Use	25.4	50.7	23.9	71
Psych. Hosp. -MR/DD Facilities	1.5	Eating	46.5	45.1	8.5	71
Rehabilitation Hospitals	0.0	*****				
Other Locations	7.5	Continence				
Total Number of Admissions	67	Indwelling Or External Catheter	8.5	Special Treatments		
Percent Discharges To:		Occ/Freq. Incontinent of Bladder	36.6	Receiving Respiratory Care		7.0
Private Home/No Home Health	20.8	Occ/Freq. Incontinent of Bowel	33.8	Receiving Tracheostomy Care		1.4
Private Home/With Home Health	5.6			Receiving Suctioning		0.0
Other Nursing Homes	2.8	Mobility		Receiving Ostomy Care		2.8
Acute Care Hospitals	1.4	Physically Restrained	5.6	Receiving Tube Feeding		2.8
Psych. Hosp. -MR/DD Facilities	1.4			Receiving Mechanically Altered Diets		18.3
Rehabilitation Hospitals	1.4	Skin Care		Other Resident Characteristics		
Other Locations	9.7	With Pressure Sores	5.6	Have Advance Directives		91.5
Deaths	56.9	With Rashes	4.2	Medications		
Total Number of Discharges				Receiving Psychoactive Drugs		62.0
(Including Deaths)	72			*****		

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

	Ownership:			Bed Size:		Licensure:		All	
	This Facility	Peer Group	Ratio	100-199	Ratio	Peer Group	Ratio	Facilities	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	68.9	80.4	0.86	82.6	0.83	84.1	0.82	84.5	0.82
Current Residents from In-County	80.3	74.2	1.08	79.7	1.01	76.2	1.05	77.5	1.04
Admissions from In-County, Still Residing	38.8	19.0	2.04	22.3	1.74	22.2	1.75	21.5	1.80
Admissions/Average Daily Census	94.4	135.3	0.70	126.4	0.75	112.3	0.84	124.3	0.76
Discharges/Average Daily Census	101.4	137.7	0.74	127.9	0.79	112.8	0.90	126.1	0.80
Discharges To Private Residence/Average Daily Census	26.8	57.0	0.47	52.7	0.51	44.1	0.61	49.9	0.54
Residents Receiving Skilled Care	88.7	89.4	0.99	89.2	0.99	89.6	0.99	83.3	1.06
Residents Aged 65 and Older	94.4	95.9	0.98	95.1	0.99	94.3	1.00	87.7	1.08
Title 19 (Medicaid) Funded Residents	63.4	71.6	0.89	70.7	0.90	70.1	0.90	69.0	0.92
Private Pay Funded Residents	18.3	19.0	0.96	19.5	0.94	21.4	0.86	22.6	0.81
Developmentally Disabled Residents	1.4	1.2	1.16	0.9	1.60	0.9	1.54	7.6	0.18
Mentally Ill Residents	46.5	35.9	1.29	36.3	1.28	39.6	1.17	33.3	1.39
General Medical Service Residents	0.0	18.2	0.00	19.1	0.00	17.0	0.00	18.4	0.00
Impaired ADL (Mean)	48.5	47.3	1.02	48.4	1.00	48.2	1.01	49.4	0.98
Psychological Problems	62.0	45.0	1.38	49.3	1.26	50.8	1.22	50.1	1.24
Nursing Care Required (Mean)	5.3	6.7	0.78	6.5	0.81	6.7	0.78	7.2	0.74